



Trends in early-onset GI cancers in Puerto Rico

Maria Gonzalez-Pons Assistant Investigator Cancer Biology Division

I have no financial disclosures



Early-onset cancer

 Diagnosis of early-onset cancers, defined as cancers in adults aged 18-49 years, are increasing in developed countries

- Cancers commonly seen in older people are now being diagnosed in younger adults, for example pancreatic, breast, stomach, and colorectal cancers (Bergquist et al. 2019; Araghi et al. 2019)
 - Cancer incidence varies by age group, sex, and race/ethnicity

Urgent research is needed to understand the multifactorial reasons for the increasing trend in the diagnosis of early-onset cancer cases





Colorectal cancer



https://www.biovendor.com/colorectal-cancer-...

Hispanics and Colorectal Cancer

- Colorectal cancer (CRC) is the leading cause of cancer death among Hispanic men and women living in Puerto Rico
- In the mainland U.S., Cubans and Puerto Ricans have disproportionately higher CRC incidence and mortality rates than other USH subgroups (Pinheiro et al. 2017, Miller et al. 2018)
- Although CRC incidence trends have been declining overall, the incidence in individuals younger than 50 years (early-onset CRC) have been increasing consistently since the mid-1990s
- Early-onset CRC incidence is expected to increase by more than 140% by 2030 (Bailey et al. 2015)



Analysis of early-onset colorectal cancer incidence trends

 CRC trends overall reflect most cases that occur in older age groups, masking trends in young adults

 We compared early-onset and average-onset CRC incidence trends during a 20-year period (2000-2019) between Hispanics living in Puerto Rico (PRH) and other racial/ethnic groups in the U.S., including non-Hispanic Whites (NHW), Non-Hispanics Blacks (NHB), Hispanics (USH), and Non-Hispanic Asian or Pacific Islanders (NHAPI)



Demographic and clinical characteristics for incident CRC by race/ethnicity, 2000-2019

- US mainland Hispanics have the highest percentage of earlyonset CRC cases
- A higher percentage of PR and US mainland Hispanic men are diagnosed with early-onset CRC
- NHB and USH had the highest percentage of cases diagnosed at advanced stages



Characteristic	PRH n= 29,761 (%)	NHW n= 457,761 (%)	NHB n= 68,685 (%)	NHAPI n= 51,294 (%)	USH n= 67,878 (%)
Age group					
20-49	2,613 (8.8)	37,881 (8.3)	8,512 (12.4)	6,545 (12.8)	11,419 (16.8)
50+	27,148 (91.2)	419,880 (91.7)	60,173 (87.6)	44,749 (87.2)	56,459 (83.2)
Sex					
Male	16,447 (55.3)	240,269 (52.5)	34,490 (50.2)	27,044 (52.7)	37,026 (54.5)
Female	13,314 (44.7)	217,492 (47.5)	34,195 (49.8)	24,250 (47.3)	30,852 (45.5)
Location					
Right colon	10,847 (36.4)	197,090 (43.1)	31,281 (45.5)	16,144 (31.5)	25,225 (37.2)
Left colon	9,315 (31.3)	121,742 (26.6)	19,702 (28.7)	17,655 (34.4)	19,648 (28.9)
Colon, NOS	1,348 (4.5)	11,701 (2.6)	2,508 (3.7)	1,024 (2.0)	1,925 (2.8)
Rectum	8,251 (27.7)	127,228 (27.8)	15,194 (22.1)	16,471 (32.1)	21,080 (31.1)
Stage at diagnosis					
Localized	11,705 (39.3)	184,313 (40.3)	24,503 (35.7)	18,767 (36.6)	24,242 (35.7)
Regional	11,939 (40.1)	172,254 (37.6)	24,593 (35.8)	20,632 (40.2)	26,476 (39.0)
Distant	3,962 (13.3)	85,608 (18.7)	16,899 (24.6)	9,917 (19.3)	14,566 (21.5)
Unknown	2,155 (7.2)	15,567 (3.4)	2,687 (3.9)	1,972 (3.8)	2,582 (3.8)

Age-standardized CRC Incidence Rates (per 100,000) by race/ethnicity, 2000 to 2019

 Age-standardized incidence rates were calculated for each racial/ethnic group using the direct method (2000 US population)

	PRH	NHW	NHB	NHAPI	USH	US overall
Overall	48.11	46.19	52.63	38.49	40.61	45.42
20-49	11.99	11.85	12.10	9.33	9.30	11.02
50+	105.19	100.45	116.68	84.58	90.11	99.80
Male	59.27	53.53	62.47	46.22	48.38	52.88
20-49	12.84	13.34	12.73	10.34	9.55	12.04
50+	132.67	117.05	141.09	102.92	109.76	117.42
Female	39.13	39.62	45.35	32.26	34.38	39.03
20-49	11.24	10.34	11.54	8.45	9.05	10.01
50+	83.22	85.90	98.80	69.88	74.41	84.89



Average annual percent change (AAPC) in earlyonset CRC incidence by race/ethnic group 2000-2019

 Average annual percent change (AAPC) was estimated using the Joinpoint Regression Program from SEER



	PRH	NHW	NHB	NHAPI	USH	
	AAPC	AAPC (95%	AAPC	AAPC	AAPC (95%	
	(95% CI)	CI)	(95% CI)	(95% CI)	CI)	
Overall	2.7*	2.0	0.6*	0.1	2.3*	
	(2.0 to 3.5)	(1.8 to 2.2)	(0.2 to 1.0)	(-0.3 to 0.6)	(1.6 to 3.0)	
Sex						
Male	3.0*	2.2*	0.4	0.2	2.0*	
	(2.1 to 4.0)	(1.9 to 2.4)	(-0.1 to 1.0)	(-0.6 to 1.0)	(1.6 to 2.5)	
Female	2.5*	1.5*	0.8*	0.1	2.2*	
	(1.6 to 3.4)	(1.0 to 2.0)	(0.1 to 1.5)	(-0.5 to 0.7)	(1.7 to 2.7)	
Stage at diagnosis						
Localized	3.5	0.5*	0.1	-1.5*	0.6	
	(-2.7 to 10.0)	(0.1 to 1.0)	(-0.7 to 0.9)	(-2.5 to -0.5)	(-0.1 to 1.3)	
Regional	2.1*	2.0*	0.4	0.3	2.2*	
	(0.7 to 3.5)	(1.7 to 2.4)	(-0.2 to 1.1)	(-0.4 to 1.1)	(1.5 to 2.9)	
Distant	4.9*	3.7*	1.4*	1.3*	3.4*	
	(3.7 to 6.1)	(3.4 to 4.1)	(0.7 to 2.0)	(0.4 to 2.1)	(2.6 to 4.2)	

Average annual percent change (AAPC) in average-onset CRC incidence (age 50+) by race/ethnic group 2000-2019

 Average annual percent change (AAPC) was estimated using the Joinpoint Regression Program from SEER



	PRH	NHW	NHB	NHAPI	USH	
	AAPC	AAPC	AAPC	AAPC	AAPC	
	(95% CI)					
Overall	-0.8	-3.1*	-2.7*	-2.9*	-2.1*	
	(-1.6 to 0.0)	(-3.6 to -2.5)	(-3.2 to -2.2)	(-3.2 to -2.7)	(-2.4 to -1.8)	
Sex						
Male	-0.2	-3.3*	-2.6	-2.8*	-2.2*	
	(-1.0 to 0.6)	(-3.6 to -3.0)	(-3.5 to -1.6)	(-3.1 to -2.6)	(-3.2 to -1.1)	
Female	-1.2*	-3.0*	-3.2*	-3.1*	-2.1*	
	(-1.9 to -0.4)	(-3.5 to -2.5)	(-3.5 to -2.8)	(-3.5 to -2.8)	(-2.3 to -1.9)	
Stage at diagnosis						
Localized	0.3	-3.4*	-3.0*	-2.8*	-2.7*	
	(-1.6 to 2.3)	(-4.1 to -2.7)	(-3.7 to -2.4)	(-4.2 to -1.4)	(-3.4 to -1.9)	
Regional	-0.9	-3.2*	-3.6*	-3.7*	-2.3*	
	(-2.7 to 0.8)	(-3.6 to -2.7)	(-3.9 to -3.3)	(-5.7 to -1.7)	(-2.7 to -1.9)	
Distant	1.0	-1.6*	-1.9*	-1.9*	-1.2*	
	(-1.2 to 3.3)	(-2.1 to -1.1)	(-2.3 to -1.6)	(-2.4 to -1.5)	(-1.6 to -0.8)	

What are the factors contributing to the early-onset colorectal cancer disparities among PR Hispanics?

Known modifiable risk factors

Genetics and epigenetics

A higher percentage of
 Amerindian ancestry was associated
 with early-onset CRC

 A higher percentage of African ancestry was associated with rectal tumors (Perez-Mayoral et al. 2019)



Gastric cancer





Hispanics and Gastric Cancer

- In 2023, approximately 26,500 individuals will be diagnosed with gastric cancer, and 11,130 patients will succumb to this malignancy in the U.S.
- Gastric cancer is more commonly diagnosed in Hispanics, non-Hispanic Blacks, Native Americans, and Asian/Pacific Islanders than it is in non-Hispanic whites
- The median age of diagnosis is 68 years; however, an increase in gastric cancer incidence rates has been reported among individuals younger than 50 years

Gastric cancer is the 15th most commonly diagnosed malignancy in Puerto Rico
 It is the 7th and 9th leading cause of cancer-related death among men and women, respectively

Analysis of gastric cancer incidence

 Compared gastric cancer incidence trends during a 15-year period (2002-2016) between Hispanics living in Puerto Rico (PRH) and other racial/ethnic groups in the U.S., including non-Hispanic Whites (NHW), Non-Hispanics Blacks (NHB), Hispanics (USH), and Non-Hispanic Asian or Pacific Islanders (NHAPI)



Cruz-Cruz et al. 2022

Demographic and clinical characteristics for incident gastric cancer by race/ethnicity, 2002-2016

- The percentage of cases of cases <50 and <u>></u>50 are similar to NHW
- Could not include location because there was a lot of missing data
 - Very low number of cardia tumors among PR Hispanics



Characteristic	PRH	NHW	NHB	NHAPI	USH	
	n = 4202 (%)	<i>n</i> = 43,164 (%)	<i>n</i> = 10,414 (%)	<i>n</i> = 11,548 (%)	<i>n</i> = 14,041 (%)	
Age group						
<50	276 (6.6)	2897 (6.7)	1167 (11.2)	1280 (11.1)	2856 (20.3)	
50+	3926 (93.4)	40,267 (93.3)	9247 (88.8)	10,268 (88.9)	11,185 (79.7)	
IQ50 (IQ25, IQ75)	72 (63, 81)	71 (61, 80)	68 (57, 78)	59 (71, 80)	52 (65, 76)	
Sex						
Male	2527 (60.1)	28,879 (66.9)	6184 (59.3)	6638 (57.5)	8207 (58.5)	
Female	1675 (39.9)	14,285 (33.1)	4230 (40.6)	4910 (42.5)	5834 (41.5)	
Stage at diagnosis						
Localized	1343 (32.0)	10,132 (23.5)	2365 (22.7)	2945 (25.5)	2648 (18.9)	
Regional	1414 (33.7)	12,214 (28.3)	3016 (28.9)	3716 (32.2)	4106 (29.2)	
Distant	811 (19.3)	16,527 (38.3)	3964 (38.1)	3791 (32.8)	6018 (42.9)	
Unknown	634 (15.0)	4291 (9.9)	1069 (10.3)	1096 (9.5)	1269 (9.0)	

Annual percent change (APC) in gastric cancer incidence by racial/ethnic group from 2002-2016

	PRH		NHW		NHB		NHAPI		USH	
	n	APC (%)	n	APC (%)	n	APC (%)	n	APC (%)	n	APC (%)
Overall	4,202	-2.8*	43,164	-1.6*	10,414	-2.9*	11,548	-3.7*	14,041	-2.3*
		(-4.8 to -0.7)		(-1.9 to -1.4)		(-3.5 to -2.4)		(-4.2 to -3.1)		(-2.7 to -1.9)
Age group										
<50	276	4.2	2,897	-0.5	1,167	-2.1*	1,280	-2.6*	2,856	0.4
		(-2.0 to 10.9)		(-1.4 to 0.4)		(-3.0 to -1.2)		(-4.0 to -1.3)		(-0.3 to 1.1)
50+	3,926	-3.2*	40,267	-1.7*	9,247	-3.0*	10,268	-3.8*	11,185	-2.7*
		(-5.3 to -1.1)		(-2.0 to -1.5)		(-3.6 to -2.4)		(-4.4 to -3.2)		(-3.1 to -2.3)
Gender										
Male	2,527	-2.6	28,879	-1.7*	6,184	-3.2*	6,638	-3.7*	8,207	-2.5*
		(-5.3 to 0.3)		(-2.1 to -1.4)		(-3.9 to -2.4)		(-4.3 to -3.1)		(-3.1 to -1.9)
Female	1,675	-3.5*	14,285	-1.9*	4.230	-2.8*	4,910	-3.7*	5,834	-2.2*
		(-5.8 to -1.1)		(-2.3 to -1.5)		(-3.7 to -1.9)		(-4.4 to -3.0)		(-2.8 to -1.6)
Stage at diagnosis										
Localized	1,343	-5.1*	10,132	-0.6*	2,365	-3.2*	2,945	-3.9*	2,648	-2.2*
		(-6.3 to -3.9)		(-1.2 to 0.0)		(-4.2 to -2.1)		(-5.1 to -2.6)		(-3.4 to -1.0)
Regional	1,414	1.6*	12,214	-3.3*	3,016	-4.3*	3,716	-5.3*	4,106	-3.9*
		(0.0 to 3.2)		(-3.8 to -2.7)		(-5.4 to -3.1)		(-6.1 to -4.5)		(-4.6 to -3.2)
Distant	811	-6.2*	16,527	-0.3	3,964	-1.3*	3,791	-2.3*	6,018	-1.0*
		(-8.1 to -4.3)		(-0.8 to 0.1)		(-2.2 to -0.3)		(-3.2 to -1.5)		(-1.7 to -0.3)

What are the factors contributing to early-onset gastric cancer disparities among PR Hispanics?

oH. pylori

H. pylori seroprevalence in Puerto Rico is 33.0% (n=528), which is comparable to the rates reported in the mainland U.S. (30.7%) (Gonzalez-Pons et al. 2018, Grad et al. 2012)

GIM prevalence

- The GIM prevalence rate in Puerto Rico is 10.7% (4,707 of 43,993 upper endoscopy pathologies), which is higher than the pooled rates reported for the mainland U.S. (4%) (Cruz-Cruz et al. 2021, Altayar et al. 2020)
- *H. pylori* was detected in 26.9% of the GIM cases
- Most pathology reports lacked information regarding the high-risk subtypes (99.6%) and extension (71.2%)

What are the factors contributing to early-onset gastric cancer disparities among PR Hispanics?

Genetics and epigenetics

- Preliminary pro-inflammatory SNP distribution between among PR Hispanics
 - Percentage of pro-inflammatory vs. non pro-inflammatory alleles at IL-1β : rs143627, IL-6 : rs1800795, and IL-10 : rs1800871.



■ WT ■ Pro-inflammatory

What are the factors contributing to the early-onset gastrointestinal cancer disparities among PR Hispanics?

Non-modifiable factors	Modifiable factors
Genetic admixture	Obesity
Other predisposing genetic factors	Diet
Epigenetics	Microbiome/H. pylori
	Smoking & Drinking
	Stress



Acknowledgements

- Gastrointestinal Genetics
 and Epidemiology Network
 (GI GENE) team
 - Marcia Cruz-Correa
 - Ingrid Montes-Rodriguez
 - Hilmaris Centeno Girona
 - Elba Caraballo
 - Leslie Casiano
 - \circ Belisa Suarez
 - Raul Llanos
 - Madeline Martir
 - Jessica Hernandez
 - Krystel Gonzalez



- Puerto Rico Central
 - **Cancer Registry**
 - o Guillermo Tortolero Luna
 - Carlos Torres















PR / Male and female / 20-49 / Localized: 3 Joinpoints